

Fill in this information to identify your case:			
Debtor 1	Kathleen Marie Nelson		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI			
Case number (If known)	17-48298		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	40,000.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	6,130.00
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	46,130.00

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D...	\$	96,479.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6f of Schedule E/F.....	\$	14,589.93

Your total liabilities \$ 111,068.93

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I.....	\$	1,273.00
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J.....	\$	345.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8. From the *Statement of Your Current Monthly Income*; Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 21.00

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were Intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>0.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	Kathleen Marie Nelson	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI		
Case number	17-48298	

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

27035 St Hwy U

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$40,000.00 Current value of the portion you own? \$40,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Home is in disrepair, carpet is worn, holes in the walls

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$40,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No

Yes

3.1 Make: Dodge
Model: Grand Caravan
Year: 2013
Approximate mileage: 94,000

Other Information:

Not running, transmission is out

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$3,000.00 \$3,000.00

3.2 Make: Chevrolet
Model: Suburban
Year: 1992
Approximate mileage: 286,000

Other Information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$800.00 \$800.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No

Yes

4.1 Make: Craft
Model: Trailer
Year: 2004

Other Information:

5x8 Utility trailer

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$150.00 \$150.00

4.2 Make: Tesh
Model: Trailer
Year: 2009

Other Information:

Trailer for Medical Power Chair

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$300.00 \$300.00

4.3 Make: Terry
Model: Travel Trailer
Year: 1959

Other Information:

Camper trailer, bad shape.
Needs work on the bathroom.
Cannot be used

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$500.00 \$500.00

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$4,750.00

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Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No

Yes. Describe.....

Couch	
Desk	
Table & Chairs	
Tables	
Bed	
Dressers	
Mirror	
Microwave	
Refrigerator	
Deep Freezer	
Dishwasher	
Washer & Dryer	
Stove	
Dishes	
Cookware	
Vacuum	
Air Conditioner	
Lawn Mower	
Dog house	
	\$850.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe.....

TV	
Stereo	
DVD/ VCR player	
Cell Phone	
	\$80.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

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Women's Clothing	\$100.00
------------------	----------

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Costume Jewelry Glasses	\$20.00
----------------------------	---------

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

3 Dogs	\$30.00
--------	---------

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

Power Chair	\$300.00
-------------	----------

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$1,380.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

17.1. Checking Account	Bank of America	\$0.00
------------------------	-----------------	--------

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

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20. Government and corporate bonds and other negotiable and non-negotiable Instruments
Negotiable Instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable Instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes.

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes.

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

Money or property owed to you

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security
benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

Debtor 1 Kathleen Marie Nelson

Case number (if known) 17-48298

31. Interests in Insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim.....

35. Any financial assets you did not already list

No

Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$0.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest In That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 Kathleen Marie Nelson

Case number (if known) 17-48298

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$40,000.00
56. Part 2: Total vehicles, line 5	\$4,750.00	
57. Part 3: Total personal and household items, line 15	\$1,380.00	
58. Part 4: Total financial assets, line 36	\$0.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 64	\$0.00	
62. Total personal property. Add lines 56 through 61...	<u>\$6,130.00</u>	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		<u>\$46,130.00</u>

Fill in this information to identify your case:

Debtor 1	Kathleen Marie Nelson	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	EASTERN DISTRICT OF MISSOURI	
Case number (if known)	17-48298	

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
1992 Chevrolet Suburban 286,000 miles Line from <i>Schedule A/B</i> : 3.2	\$800.00	<input checked="" type="checkbox"/> \$800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(5)
2004 Craft Trailer 5x8 Utility trailer Line from <i>Schedule A/B</i> : 4.1	\$150.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)
2009 Tesh Trailer Trailer for Medical Power Chair Line from <i>Schedule A/B</i> : 4.2	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)
1959 Terry Travel Trailer Camper trailer, bad shape. Needs work on the bathroom. Cannot be used Line from <i>Schedule A/B</i> : 4.3	\$500.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)

Debtor 1 Kathleen Marie Nelson

Case number (if known) 17-48298

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		<i>Check only one box for each exemption.</i>		
Couch	\$850.00	<input checked="" type="checkbox"/>	\$850.00	RSMo § 513.430.1(1)
Desk		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit	
Table & Chairs				
Tables				
Bed				
Dressers				
Mirror				
Microwave				
Refrigerator				
Deep Freezer				
Dishwasher				
Washer & Dryer				
Stove				
Dishes				
Cookware				
Vacuum				
Air Conditioner				
Lawn Mower				
Dog house				
Line from <i>Schedule A/B</i> : 6.1				
TV	\$80.00	<input checked="" type="checkbox"/>	\$80.00	RSMo § 513.430.1(1)
Stereo		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit	
DVD/ VCR player				
Cell Phone				
Line from <i>Schedule A/B</i> : 7.1				
Women's Clothing	\$100.00	<input checked="" type="checkbox"/>	\$100.00	RSMo § 513.430.1(1)
Line from <i>Schedule A/B</i> : 11.1		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit	
Costume Jewelry	\$20.00	<input checked="" type="checkbox"/>	\$20.00	RSMo § 513.430.1(2)
Glasses		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit	
Line from <i>Schedule A/B</i> : 12.1				
Power Chair	\$300.00	<input checked="" type="checkbox"/>	\$300.00	RSMo § 513.430.1(9)
Line from <i>Schedule A/B</i> : 14.1		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	Kathleen Marie Nelson		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI			
Case number 17-48298 (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Creditor's Name	Describe the property that secures the claim:	Column A	Column B	Column C
2.1 Ditech	27035 St Hwy U Warrenton, MO 63383 Warren County Home is in disrepair, carpet is worn, holes in the walls	Amount of claim Do not deduct the value of collateral. \$78,557.00	Value of collateral that supports this claim \$40,000.00	Unsecured portion if any \$38,557.00

Attn: Bankruptcy
Po Box 6172
Rapid City, SD 57709

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Opened
06/02 Last
Active

Date debt was incurred 3/05/17

Last 4 digits of account number 1882

Creditor's Name	Describe the property that secures the claim:	Column A	Column B	Column C
2.2 Exeter Finance Corp	2013 Dodge Grand Caravan 94,000 miles Not running, transmission is out	\$17,922.00	\$3,000.00	\$14,922.00

Po Box 166008
Irving, TX 75016

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Debtor 1 Kathleen Marie Nelson	Case number (if known)	<u>17-48298</u>
First Name	Middle Name	Last Name
<input type="checkbox"/> Check if this claim relates to a community debt		
<input type="checkbox"/> Other (including a right to offset) _____		
Opened 04/15 Last		
Active		
Date debt was incurred <u>8/12/16</u>	Last 4 digits of account number	<u>1001</u>

Add the dollar value of your entries in Column A on this page. Write that number here:
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

<u>\$96,479.00</u>
<u>\$96,479.00</u>

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Substitute Trustee Corp 12400 Olive Blvd Ste 402 Saint Louis, MO 63141	On which line in Part 1 did you enter the creditor? <u>2.1</u>
		Last 4 digits of account number _____

Fill in this information to identify your case:

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	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI			
Case number 17-48298 (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1	Account Resolution Corp Nonpriority Creditor's Name 700 Goddard Ave Chesterfield, MO 63005 Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number 1271	\$67.00
		When was the debt incurred? Opened 6/26/12	
		As of the date you file, the claim is: Check all that apply	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Provider Plus Inc	

4.2	<p>Debtor 1 Kathleen Marie Nelson</p> <p>Ad Astra Recovery Nonpriority Creditor's Name 7330 W 33rd Street N Ste 118 Wichita, KS 67205 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Case number (if known) 17-48298</p> <p>Last 4 digits of account number 3600</p> <p>When was the debt incurred? Opened 04/12</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Collection Attorney Speedycash.Com 88-Mo</p>	\$270.00
4.3	<p>Cash Net USA Nonpriority Creditor's Name 175 West Jackson Ste 1000 Chicago, IL 60604 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Payday loan</p>	\$1,200.00
4.4	<p>Choice Recovery Inc Nonpriority Creditor's Name 1550 Old Henderson Rd Ste 100 Columbus, OH 43220 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 2168</p> <p>When was the debt incurred? Opened 08/16</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Collection Attorney Med Resources</p>	\$671.00

Debtor 1 Kathleen Marie Nelson		Case number (if known)	17-48298
4.5	Choice Recovery Inc Nonpriority Creditor's Name 1550 Old Henderson Rd Ste 100 Columbus, OH 43220 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7289 When was the debt incurred? Opened 10/15 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Med Resources	\$189.00
4.6	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Rd Jacksonville, FL 32256 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 9185 When was the debt incurred? Opened 03/14 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Sprint	\$1,043.00
4.7	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Rd Jacksonville, FL 32256 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 2156 When was the debt incurred? Opened 10/15 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Charter Communications	\$561.00

Debtor 1 <u>Kathleen Marie Nelson</u>	Case number (if known) <u>17-48298</u>
4.8 <u>Everhome Mortgage Co/Ever Bank</u> Nonpriority Creditor's Name Attn: Bankruptcy Department 301 West Bay Street Jacksonville, FL 32202 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2907</u> \$0.00 When was the debt incurred? <u>Opened 6/25/02 Last Active 4/08/14</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Mortgage</u>
4.9 <u>J C System Inc</u> Nonpriority Creditor's Name Po Box 64378 Saint Paul, MN 55164 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8001</u> \$660.00 When was the debt incurred? <u>Opened 09/11</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney Warrenton Veterinary Clinic</u>
4.10 <u>Jh Portfolio Debt Equities LLC</u> Nonpriority Creditor's Name 5757 Phantom Dr Ste 225 Hazelwood, MO 63042 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0647</u> \$1,377.00 When was the debt incurred? <u>Opened 03/15</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Factoring Company Account World Acceptance Corporation O</u>

Debtor 1	Kathleen Marie Nelson		Case number (if known)	17-48298
4.1 1	Midwest Recovery Syste	Nonpriority Creditor's Name Po Box 899 Florissant, MO 63032 Number Street City State Zip Code	Last 4 digits of account number	5585
		Who incurred the debt? Check one.	When was the debt incurred?	Opened 06/17
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans		
	Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney Net Cash Processing</u>		
4.1 2	Portfolio Recovery	Nonpriority Creditor's Name PO Box 41067 Norfolk, VA 23541 Number Street City State Zip Code	Last 4 digits of account number	\$6,408.93
	Who incurred the debt? Check one.	When was the debt incurred?		
	<input checked="" type="checkbox"/> Debtor 1 only	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	Is the claim subject to offset?	<input type="checkbox"/> Student loans		
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input checked="" type="checkbox"/> Other. Specify <u>Collections</u>		
4.1 3	Quality Asset Recovery	Nonpriority Creditor's Name Po Box 239 Gibbsboro, NJ 08026 Number Street City State Zip Code	Last 4 digits of account number	3047
	Who incurred the debt? Check one.	When was the debt incurred?	\$650.00	
	<input checked="" type="checkbox"/> Debtor 1 only	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	Is the claim subject to offset?	<input type="checkbox"/> Student loans		
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input checked="" type="checkbox"/> Other. Specify <u>05 Action Fast Bail Bonds</u>		

Debtor 1	Kathleen Marie Nelson		Case number (if known)	17-48298
4.1	Transworld Systems	Last 4 digits of account number	\$430.00	
4	Nonpriority Creditor's Name 507 Prudential Rd Horsham, PA 19044 Number Street City State Zip Code	When was the debt incurred?		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collections</u>		
4.1	Trident Asset Management	Last 4 digits of account number	\$94.00	
5	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 888424 Atlanta, GA 30356 Number Street City State Zip Code	When was the debt incurred?	Opened 3/16/11	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Returned Check Gamestop 2908</u>		
4.1	Verizon	Last 4 digits of account number	\$429.00	
6	Nonpriority Creditor's Name Attn: Wireless Bankruptcy Admin 500 Technology Dr Ste 500 Weldon Springs, MO 63304 Number Street City State Zip Code	When was the debt incurred?	Opened 08/99 Last Active 9/30/11	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify		

Debtor 1	Kathleen Marie Nelson	Case number (if known)	17-48298
4.1 7	<p>World Finance Corp Nonpriority Creditor's Name World Acceptance Corp/Attn Bankruptcy Po Box 6429 Greenville, SC 29606</p> <p>Number Street City State Zip Code Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>7301</p> <p>When was the debt incurred?</p> <p>Opened 04/08 Last Active 12/03/08</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Secured</u></p>	\$0.00

Part 3: List Others to Be Notified About a Debt That You Already Listed

6. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Gamache & Myers 1000 Camera Ave Ste A Saint Louis, MO 63126	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.10</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	
Name and Address SSM Health StJoseph Hospital PO Box 776236 Chicago, IL 60677	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.14</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1		6a. Domestic support obligations	Total Claim \$ <u>0.00</u>
		6b. Taxes and certain other debts you owe the government	6b. \$ <u>0.00</u>
		6c. Claims for death or personal injury while you were Intoxicated	6c. \$ <u>0.00</u>
		6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
		6e. Total Priority. Add lines 6a through 6d.	6e. \$ <u>0.00</u>
Total claims from Part 2		6f. Student loans	Total Claim \$ <u>0.00</u>
		6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
		6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
		6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <u>14,589.93</u>
		6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <u>14,589.93</u>

Fill in this information to identify your case:

Debtor 1	Kathleen Marie Nelson	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	EASTERN DISTRICT OF MISSOURI	
Case number (if known)	17-48298	

Check if this is an
amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code		State what the contract or lease is for
2.1	Name		
	Number	Street	
	City	State	ZIP Code
2.2	Name		
	Number	Street	
	City	State	ZIP Code
2.3	Name		
	Number	Street	
	City	State	ZIP Code
2.4	Name		
	Number	Street	
	City	State	ZIP Code
2.5	Name		
	Number	Street	
	City	State	ZIP Code

Fill in this information to identify your case:

Debtor 1	Kathleen Marie Nelson		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI			
Case number 17-48298 (if known)			

Check if this is an amended filing

Official Form 106H
Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 Oliver Nelson
Deceased

Schedule D, line 2.1
 Schedule E/F, line _____
 Schedule G _____
Ditech

3.2 Sharecka Thomas
PO Box 294
Warrenton, MO 63383

Schedule D, line 2.2
 Schedule E/F, line _____
 Schedule G _____
Exeter Finance Corp

Fill in this information to identify your case:	
Debtor 1	Kathleen Marie Nelson
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI	
Case number (if known)	17-48298

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

12/15

Official Form 106I

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

Employed
 Not employed

Include part-time, seasonal, or self-employed work.

Occupation

Employed
 Not employed

Occupation may include student or homemaker, if it applies.

Employer's name

Employer's address

Employer's address

How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or
non-filing spouse

2. \$ 0.00 \$ N/A

3. +\$ 0.00 +\$ N/A

4. \$ 0.00 \$ N/A

Debtor 1 <u>Kathleen Marie Nelson</u>	Case number (if known)	<u>17-48298</u>																								
<table border="0"> <tr> <td style="text-align: center;">Copy line 4 here</td> <td style="text-align: center;">For Debtor 1</td> <td style="text-align: center;">For Debtor 2 or non-filing spouse</td> </tr> <tr> <td>.....</td> <td>4. \$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> </table>			Copy line 4 here	For Debtor 1	For Debtor 2 or non-filing spouse	4. \$ <u>0.00</u>	\$ <u>N/A</u>																		
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<p>10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.</p> <table border="0"> <tr> <td>10. \$ <u>1,273.00</u></td> <td>+ \$ <u>N/A</u></td> <td>= \$ <u>1,273.00</u></td> </tr> </table>			10. \$ <u>1,273.00</u>	+ \$ <u>N/A</u>	= \$ <u>1,273.00</u>																					
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<p>11. State all other regular contributions to the expenses that you list in <i>Schedule J</i>. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i>. Specify: _____</p> <table border="0"> <tr> <td>11. + \$ <u>0.00</u></td> </tr> </table>			11. + \$ <u>0.00</u>																							
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<p>12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i>, if it applies</p> <table border="0"> <tr> <td>12. \$ <u>1,273.00</u></td> </tr> </table>			12. \$ <u>1,273.00</u>																							
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<p>13. Do you expect an increase or decrease within the year after you file this form?</p> <p><input checked="" type="checkbox"/> No.</p> <p><input type="checkbox"/> Yes. Explain: _____</p>																										

Fill in this information to identify your case:	
Debtor 1	Kathleen Marie Nelson
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	EASTERN DISTRICT OF MISSOURI
Case number (if known)	17-48298

Check if this is:
 An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses	
----------------------	--

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ 0.00
4b. \$ 0.00
4c. \$ 10.00
4d. \$ 0.00
5. \$ 0.00

Debtor 1 <u>Kathleen Marle Nelson</u>	Case number (if known)	<u>17-48298</u>
<p>6. Utilities:</p> <p>6a. Electricity, heat, natural gas <u>100.00</u> 6b. Water, sewer, garbage collection <u>0.00</u> 6c. Telephone, cell phone, Internet, satellite, and cable services <u>20.00</u> 6d. Other. Specify: <u>0.00</u></p> <p>7. Food and housekeeping supplies <u>150.00</u> 8. Childcare and children's education costs <u>0.00</u> 9. Clothing, laundry, and dry cleaning <u>0.00</u> 10. Personal care products and services <u>0.00</u> 11. Medical and dental expenses <u>20.00</u> 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. <u>0.00</u> 13. Entertainment, clubs, recreation, newspapers, magazines, and books <u>0.00</u> 14. Charitable contributions and religious donations <u>0.00</u></p> <p>15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.</p> <p>15a. Life Insurance <u>0.00</u> 15b. Health Insurance <u>0.00</u> 15c. Vehicle Insurance <u>0.00</u> 15d. Other insurance. Specify: <u>0.00</u></p> <p>16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Personal Property Taxes</u> <u>15.00</u></p> <p>17. Installment or lease payments:</p> <p>17a. Car payments for Vehicle 1 <u>0.00</u> 17b. Car payments for Vehicle 2 <u>0.00</u> 17c. Other. Specify: <u>0.00</u> 17d. Other. Specify: <u>0.00</u></p> <p>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).</p> <p>19. Other payments you make to support others who do not live with you. Specify: <u>0.00</u> <u>0.00</u></p> <p>19.</p> <p>20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.</p> <p>20a. Mortgages on other property <u>0.00</u> 20b. Real estate taxes <u>0.00</u> 20c. Property, homeowner's, or renter's insurance <u>0.00</u> 20d. Maintenance, repair, and upkeep expenses <u>0.00</u> 20e. Homeowner's association or condominium dues <u>0.00</u></p> <p>21. Other. Specify: <u>Pet Expenses</u> <u>30.00</u></p> <p>22. Calculate your monthly expenses</p> <p>22a. Add lines 4 through 21. <u>345.00</u> 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. <u>345.00</u></p> <p>23. Calculate your monthly net income.</p> <p>23a. Copy line 12 (<i>your combined monthly income</i>) from <i>Schedule I</i>. <u>1,273.00</u> 23b. Copy your monthly expenses from line 22c above. <u>345.00</u></p> <p>23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i>. <u>928.00</u></p> <p>24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?</p> <p><input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. <u>Explain here:</u></p>		